## PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000

**Application or Docket Number** 

09781333

		CLAIMS A	S	SMALL E	VTITY		OTHER	THAN				
			(Column 1)		(Column 2)		, 1	TYPE		OR SMALL ENTIT		
TOTAL CLAIMS			34					RATE	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			34 minus 20=		• 14			X\$ 9=		OR	X\$18=	252
INDEPENDENT CLAIMS			4 minus 3 =		/			X40=		OR	X80=	65
MU	LTIPLE DEPEN	IDENT CLAIM PI	IESENT					+135=		OR	+270=	
* If the difference in column 1 is less than zero, enter "0" in column 2							L	TOTAL		OR	TOTAL	1042
Claims as amended - Part II								J.		,	OTHER	
(Column 1) (Column 2) (Column 3)								SWALL E	NTITY .	OR	SMALL	
AMENDMENT A	٠	CLAIMS REMAINING AFTER AMENDMENT	• . ,	HIGH NUME PREVIO PAID I	BER JUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 35	Minus	34	1	= /		X\$ 9=		OR	X218-	50,"
	Independent	. 7	Minus 4			= 3		X40=		OR	X80=	6000
<u></u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	+270=	
:						•	L	+135=	<del></del>	· [	TOTAL	1.500
			•				AC	DOIT. FEE		OR,	ADDIT. FEE	650,
$\overline{}$		(Column 1)		(Colun		(Column 3)						
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER JUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MON	Total	•	Minus	**		=		X\$ 9=		OR-	X\$18=	
AME	independent	•	Minus	***		=		X40=		OR	· X80=	
	FIRST PRESE	NTATION OF MU	ILTIPLE DEP	ENDENT	CLAIM		]  -					
	BEST AVAILABLE COPY									OR	+270=	
The company of the contraction o							ΑE	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID I	BER JUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	••		=		X\$ 9=		OR	X\$18=	
	Independent	•	Minus	***		=		X40=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									Un		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.												
" If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  TOTAL  ADDIT. FEE  OR  ADDIT. FEE												
		imber Previously Pai hber Previously Pai					er foun	d in the app	ropriate box	in col	umn 1.	